# NOTICE OF FILING / CLAIM FEE(S) DUE
## (CALCULATION SHEET)

APPLICATION NUMBER: *09 328 726*

### Total Fee Calculation

| | Fee Code Sm./Lg. | Total # Claims | Number Extra | X | Fee Sm. Entity | Fee Lg. Entity | = | Total |
|---|---|---|---|---|---|---|---|---|
| Basic Filing Fee | 201/101 | | | | | | = | 760.00 |
| Total Claims >20 | 203/103 | 3 | -20 = | X | | | = | |
| Independent Claims >3 | 202/102 | 2 | -3 = | X | | | = | |
| Mult. Dep Claim Present | 204/104 | | | | | | = | |
| Surcharge | 205/105 | | | | | | = | 130.00 |
| English Translation | 139 | | | | | | = | |

### TOTAL FEE CALCULATION

890.00

Fees due upon filing the application:

Total Filing Fees Due = $ _890.00_

Less Filing Fees Submitted - $ _/_

BALANCE DUE = $ _890.00_

*Babexander*
Office of Initial Patent Examination